PART B - FEE(S) TRANSMITTAL							
omplete and send	A STATE OF		or <u>Fax</u>	Commissioner fo P.O. Box 1450 Alexandria, Virg (571)-273-2885	r Patents inia 22313-1450		
INSTANCTIONS: This depth should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed wher appropriate All appropriate All appropriate All appropriates and propriate appropriate appropria							
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
HAMRE, SCHUMANN, MUELLER & LARSON, P.C. P.O. BOX 2902 MINNEAPOLIS, MN 55402-0902				Certificate of Mailing or Transmission I hereby certify that this Foo(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for express mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
express mailing label number: EV 858804533 US				Abbie Larkin (Depositor's name) Scotember 18,2006 (Date)			
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/002,913	10/23/2001		Makoto Kitabatak		10873.X30US01	8598	
TITLE OF INVENTION: SEMICONDUCTOR ELEMENT							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	DUE PREV. PAID ISSU	E FEE TOTAL FEE(S) DU	E DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0	\$1700	11/16/2006	
EXAMINER ART UNIT CLASS-SUE							
ABRAHAM, FETSUM 2826 257-192000 09/20/2006 TBESHAH2 000000074 10002913							
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.763). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of a or agents OR, after (2) the name of a registered attorney	f a single firm (having as a member a new or agent) and the names of up to ent attorneys or agents. If no name is			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) MATSUSHITA ELECTRIC INDUSTRIAL CO., LTD. OSAKA, JAPAN							
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔘 Individual 🖾 Corporation or other private group entity 🔘 Government							
4a. The following foe(s) are submitted: Solution foe 4b. Payment of Foe(s): (Please first reapply any previously paid issue fee shown above) Solution foe A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit are overpayment, to Deposit Account Number 50-3478 (enclose an extra copy of this in the property of the position of the payment of fee(s). 4b. Payment of Foe(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit are overpayment, to Deposit Account Number 50-3478 (enclose an extra copy of this in the payment of fee(s).						·	
5. Change in Entity Status (from status indicated above) [] a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. [] b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Unifed States Patent and Trademark Office.							
Authorized Signature Date September 18, 2006							
Typed or printed name _					_{√o.} 30,300		
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Petant and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.							

UNITED STATES PATENT AND TRADEMARK OFFICE

KITABATAKE

Examiner

ABRAHAM

Serial No.:

10/002,913

Group Art:

2826

Notice of Allow Date: August 16, 2006

Filed: Confirmation No.: October 23, 2001

Docket:

10873.0830US01

8598

Due Date: Title:

November 16, 2006 SEMICONDUCTOR ELEMENT

CERTIFICATE UNDER 37 CFR 1.10

Express Mail mailing label number: EV 858804533 US

Date of Deposit: September 18, 2006

I hereby certify that the papers listed below are being deposited with the United States Postal Service Express Mail Post Office to Addressee service under 37 CFR 1.10 in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450,

Arlington, VA 223J3-1350.

Name: Abbie Larkin

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

53148

Commissioner:

The following papers are transmitted herewith:

Transmittal Sheet in duplicate containing Certificate of Mailing

Ø Issue Fee Transmittal - Part B

2 Checks in the amount of \$1400 for Issue Fee and \$300 for Publication Fee

Return Postcard

Please charge any additional fees or credit overpayment to Deposit Account No. 50-3478. A duplicate of

this sheet is enclosed.

Hamre, Schumann, Mueller & Larson, P.C. P.O. Box 2902 Minneapolis, MN 55402-0902 612.455-3800

Name: Douglas P. Mueller

Reg. No.: \(30,300 \) Initials: DPM/acp